

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ALL FOR OUR COUNTRY		FEC IDENTIFICATION NUMBER ▼ C C00787432
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Majority Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2022
Mailing Address PO BOX 679219		Amount 148125.00
City Dallas	State TX	Zip Code 75267
Purpose of Expenditure Direct Mail- see Schedule B	Category/ Type 004	Transaction ID : SE.4208 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate BECKER, APRIL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Majority Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2022
Mailing Address PO BOX 679219		Amount 148125.00
City Dallas	State TX	Zip Code 75267
Purpose of Expenditure Direct Mail- see Schedule B	Category/ Type 004	Transaction ID : SE.4210 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate LEE, SUSIE, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	296250.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*McIntyre, Dustin, , ,**[Electronically Filed]*

Date

MM / DD / YYYY
11 / 01 / 2022

Signature